

State of Utah

Department of Environmental Quality Division of Air Quality Lead-Based Paint Program 150 North 1950 West P.O. Box 144820 Salt Lake City, Utah 84114-4820

UDEQ/DAQ Date Received Stamp Only	

#/Amount
#/Amount

LEAD-BASED PAINT CERTIFICATION APPLICATION FOR FIRMS

A. Applicant Information

Name of Firm:

Please complete all appropriate fields in this section. The Utah Department of Environmental Quality/Division of Air Quality (UDEQ/DAQ) will use this information to certify your firm to perform lead-based paint (LBP) activities and to track your firm's certification status in Utah. You may list up to two addresses, however, the business address listed below **must** be a street address (i.e. **not** a post office box). Attach additional sheets of paper using the following format, if necessary. Please complete this form by writing legibly (using blue or black ink only) or by using a typewriter/computer printer.

D : A.I.						
Business Address	Street Address, Suite No. (Please	e, no P.O. Box)				
	City				State	Zip Code
Mailing Address: (If different than above)	Street Address, Suite No./P.O. Bo	ıx				
	City				State	Zip Code
Firm's Phone# (_		<u>'</u>	_ext	Firm's FAX # (_)	
Firm's Officers/Titl	es: Last Name		First Name		Middle Initial	Title
	Last Name		First Name		Middle Initial	Title
	Last Name		First Name		Middle Initial	Title
Name of Attesting (Officer signing page 3 of app	Officer: Last Name		First Name		Middle Initial	Title
Attesting Officer's	Phone # ()_	-	ext	E-mail Add	ress:	
B. Type(s) of	Certified Individ	uals Employe	ed			
Please indicate th	ne type(s) of certified	ndividuals the fi	rm intends to	o employ:		
☐ Inspectors	☐ Abatement Worke	ers 🗅 Inspe	ctor/Risk As	sessors 🗆 S	Supervisors	☐ Project Designers

C. Certification Fee

The UDEQ/DAQ has established a fee of \$200.00 per year for the certification of firms performing regulated LBP activities in Utah. To determine your total LBP firm certification fee, place the number of years of certification your firm is applying for with this application (LBP firms can be certified for a period of up to three (3) years), place that number in the **Years of Certification** column of the table (below), multiply the number of years by \$200.00 and put the appropriate fee in the **LBP Firm Certification Fee** column. This firm fee must be paid to the Utah Division of Air Quality at the time of application. Certification fees represent the cost for a complete certification year or any fraction thereof. LBP firm certification will expire on December 31st of the appropriate year based on the fee received by the UDEQ/DAQ.

	Years of Certification (three years maximum)	LBP Firm Certification Fee
Certified Lead-Based Paint Firm	X \$200.00	

D. Professional Certifications

Does your **firm** (not individuals working for the firm) hold current permits, licenses, certifications, registrations in the lead-based paint activity field with the UDEQ/DAQ, USEPA, other State, Territory, or Indian Tribe? If yes, please complete the following section, one line for each permit, license, certification or registration held. Attach additional sheets of paper using the following format, if necessary.

Yes No

Certification Discipline	Area/Region (list UDEQ/DAQ, USEPA, other State, Territory, or Indian Tribe name)	Certification/Identification Number	Date received
Certification Discipline	Area/Region (list UDEQ/DAQ, USEPA, other State, Territory, or Indian Tribe name)	Certification/Identification Number	Date received
Certification Discipline	Area/Region (list UDEQ/DAQ, USEPA, other State, Territory, or Indian Tribe name)	Certification/Identification Number	Date received

E. Lead-Based Paint Activity Violations

Does your firm (not individuals working for the firm) have any past, present, or pending lead-based paint activity violations of UDEQ/DAQ, USEPA, other State, Territory, or Indian Tribe regulations? If yes, please explain below. Attach additional sheets of paper if necessary.	Yes No (circle one)

F. Additional Information

Use the following space for any additional information or comments that you want the Utah Department of Environ Quality/Division of Air Quality to consider with your application. Attach additional sheets of paper, if necessary.		

G. Certification Statement

The firm named in Section A of this application (hereafter referred to as "the firm") attests that the firm shall only employ appropriately certified employees to conduct regulated lead-based paint activities. The firm will encourage all employees to maintain their certifications according to R307-840, Utah Administrative Code (UAC) and conduct lead-based paint activities only in those areas which the employee has received specific certification. The firm and its employees will follow the work practice standards in R307-840, UAC for conducting lead-based paint activities at all times.

I hereby attest and affirm that the information included on this application, including any attachments, is true and accurate to the best of my belief and knowledge. I attest and affirm that it is the intent of the firm named in Section A of this application to meet the requirements outlined in the previous certification statement. I acknowledge that any certification issued pursuant to this application, including any attachments, will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the certification.

Official Use Only Applica	ants: Please do not write in this area Official Use Only
Salt L	_ake City, UT 84114-4820
	Box 144820
	-Based Paint Program North 1950 West
Divisi	ion of Air Quality
Utah	Department of Environmental Quality
Mail original completed application, supp	porting materials and fees in one package to:
☐ Signed and dated the application?	■ Made a copy of the application for your files?
☐ Filled out all sections of the application?	☐ Enclosed the appropriate certification fee?
Before you mail your application, please	check to make sure you have:
Attesting Officer's Printed Name	Attesting Officer's Title
Attesting Officer's Signature	Date Signed
information that materially affected the decis	sion to issue the certification.

Date Application Received _______ Date Application Reviewed ______ Date Additional Information Requested _______ Date Additional Information Received ______ Date Application Approved ______ Certification Expiration Date ______ Certification # ______ Additional Information: